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Bib Data Sheet

CONFIRMATION NO. 7875

SERIAL NUMBER 10/763,960	FILING DATE 01/26/2004  RULE	CLASS 473	GROUP ART UNIT 3711	ATTORNEY DOCKET NO. 112,811
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/445,117 02/05/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 04/29/2004

\*\* SMALL ENTITY \*\*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 5	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>[Signature]</u> Initials _____				

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## TITLE

Puck-deflecting training device

FILING FEE  RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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